			•		
C	LAIMS ONLY		Application Number	Filing Date	
	LAINO ONL!		Applicant(s)		• .
CLAIMS AS	AFTER FIRST AMENDMENT Depend Indep Depend	AFTER SECOND AMENDMENT	* May be used for additional dain	ns or amendments	
1 2 3	Depend under Depend	Indep Depend	Indep Depend 51 / / 52 / / 53	Indep Depend	Indep Depend
4 5 6 7			54 55 56		
8 9 10 11			57 58 59 60		
12 13 14			61 62 63 64		
15 16 17 18			65 66 67		
19 20 21			68 69 70 71		
22 23 24 25			72 73 74		
26 27 28 29			75 76 77 78		
30 31 32			79 80 81 82		
33 34 35 36			83 84 85 86		
37 38 39 40	/		87		
41 42 43			90 91 92 93		
44 45 46 47	/		94 95 96		
48 49 50			97 98 99 100		
Total Indep Total Depend			Total Indep Total Depend		
Total Claims			Total Claims / C		
		· .			